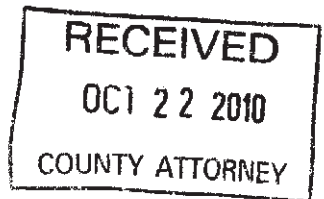


## EXHIBIT A

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ALABAMA		PROOF OF CLAIM
Name of Debtor: <b>JEFFERSON COUNTY, ALABAMA</b>	Case Number: <b>11-05736 (TBB)</b>	
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.		
Name of Creditor (the person or other entity to whom the debtor owes money or property): <b>Hambright Tywana S and Doyle Watkins</b>		<input type="checkbox"/> Check this box if this claim amends a previously filed claim.  <b>Court Claim</b> Number: _____ (If known)  Filed on: _____
Name and address where notices should be sent: <b>Hambright Tywana S and Doyle Watkins</b> c/o Anthony Piazza PO Box 550217 Birmingham AL 35255-0217  Telephone number: _____ email: _____		
Name and address where payment should be sent (if different from above):  Telephone number: _____ email: _____		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.  <b>5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a).</b> If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.  <input type="checkbox"/> Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B). <input type="checkbox"/> Wages, salaries, or commissions (up to \$11,725*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. §507 (a)(4). <input type="checkbox"/> Contributions to an employee benefit plan – 11 U.S.C. §507 (a)(5). <input type="checkbox"/> Up to \$2,600* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. §507 (a)(7). <input type="checkbox"/> Taxes or penalties owed to governmental units – 11 U.S.C. §507 (a)(8). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. §507 (a)( ).  <b>Amount entitled to priority:</b> \$ _____  * Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.
<b>1. Amount of Claim as of Date Case Filed:</b> \$ <u>300,000.00</u> If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.		
<b>2. Basis for Claim:</b> <u>False Imprisonment; loss of Consortium</u> (See instruction #2) <u>Mohammed Al-Sayid</u>		<input type="checkbox"/> Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B). <input type="checkbox"/> Wages, salaries, or commissions (up to \$11,725*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. §507 (a)(4). <input type="checkbox"/> Contributions to an employee benefit plan – 11 U.S.C. §507 (a)(5). <input type="checkbox"/> Up to \$2,600* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. §507 (a)(7). <input type="checkbox"/> Taxes or penalties owed to governmental units – 11 U.S.C. §507 (a)(8). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. §507 (a)( ).  <b>Amount entitled to priority:</b> \$ _____  * Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.
<b>3. Last four digits of any number by which creditor identifies debtor:</b> _____	<b>3a. Debtor may have scheduled account as:</b> _____ (See instruction #3a)	
<b>4. Secured Claim (See instruction #4)</b> Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.  <b>Nature of property or right of setoff:</b> <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other <b>Describe:</b> _____ <b>Value of Property:</b> \$ _____ <b>Annual Interest Rate:</b> _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable (when case was filed) <b>Amount of arrearage and other charges, as of the time case was filed, included in secured claim,</b> <b>if any:</b> \$ _____ <b>Basis for perfection:</b> _____ <b>Amount of Secured Claim:</b> \$ _____ <b>Amount Unsecured:</b> \$ _____		
<b>6. Credits.</b> The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)		
<b>7. Documents:</b> Attached are redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. If the claim is secured, box 4 has been completed, and redacted copies of documents providing evidence of perfection of a security interest are attached. (See instruction #7, and the definition of "redacted".)  DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.  If the documents are not available, please explain: _____		
<b>8. Signature:</b> (See instruction #8) Check the appropriate box. <input type="checkbox"/> I am the creditor. <input checked="" type="checkbox"/> I am the creditor's authorized agent. <input type="checkbox"/> I am the trustee, or the debtor, or their authorized agent. <input type="checkbox"/> I am a guarantor, surety, indorser, or other codebtor. (Attach copy of power of attorney, if any.) (See Bankruptcy Rule 3004.) (See Bankruptcy Rule 3005.)		
I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief. <b>Print Name:</b> <u>Anthony Piazza</u> <b>Title:</b> <u>Attorney</u> <b>Company:</b> <u>Anthony Piazza, PC</u> (Signature) <u>6-4-12</u> (Date) <b>Address and telephone number (if different from notice address above):</b> _____  <b>Telephone number:</b> <u>205 617-6211</u> <b>Email:</b> <u>Anthony.piazza@326eblt.com</u>		
<b>Penalty for presenting fraudulent claim:</b> Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.		<b>COURT USE ONLY</b>



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**STATE OF ALABAMA**

**NOTICE OF CLAIM**

**COUNTY OF JEFFERSON**

This notice of claim is being made by **TYWANNA S. HAMBRIGHT and husband, DOYLE WATKINS**

You are hereby notified that **TYWANNA S. HAMBRIGHT and husband, DOYLE WATKINS** assert claims for violation of Tywanne S. Hambright's civil and constitutional rights and Doyle Watkins loss of consortium, as a result of the willful and wanton actions of Jefferson County, Alabama, its Sheriff, Sheriff's Deputies and Investigators, and other servants, officials, agents and/or employees of Jefferson County from August 9, 2009 through February 2, 2010 when Tywanne S. Hambright was assaulted and unlawfully arrested for Possession of Drug Paraphenalia, Possession of Prescription Drugs without Prescription, and Escape 3rd, and maliciously prosecuted for Possession of Drug Paraphenalia, Possession of Prescription Drugs without Prescription, and Escape 3rd. Claimant also claims that Jefferson County, Alabama, and its Sheriff, Sheriff's Deputies and Investigators, and other servants, officials, agents and/or employees are legally responsible for the above described actions; and for the willful and wanton malicious prosecution and abuse of process of said claimant, and for the willful and wanton destruction of exculpatory evidence in possession of the Jefferson County Sheriff's Department, its Sheriff, Sheriff's Deputies and Investigators, and other servants, officials, agents and/or employees; and for their willful and/or negligent abuse of their official positions with the Jefferson County, Alabama; and for their willful and/or negligent violation of said claimant's civil and constitutional rights under the constitution of the United States; and for their willful prejudice and bias in the administration of their official duties and responsibilities in the treatment of said claimant, and for their willful and wanton unlawful application and enforcement of Jefferson County ordinances and state laws against law abiding citizens; and for their failure to investigate; and for their willful and wanton intentional difference to claimant's constitutional rights. Claimant Doyle Watkins claims loss of consortium of his wife, Tywanne S. Hambright as a result of said actions. At the present time, the undersigned claimants are not able to detail each and every willful and wanton act or omission of duty which has occurred, except to say that the above named and unnamed officers, servants, officials, magistrates, agents and/or employees of Jefferson County, Alabama have failed and refused or otherwise been so grossly negligent and acted so willfully and wantonly as to allow the above acts to have occurred.

Please be advised that the claimant is without knowledge or information sufficient to ascertain the corporate status of the Jefferson County, Alabama, its Sheriff, Sheriff's Deputies and Investigators, and other servants, officials, agents and/or employees, or their relationship to the Jefferson County, Alabama. However, it is the claimants' belief that the Sheriff, Sheriff's Deputies and Investigators, and other servants, officials, agents and/or employees Jefferson County Sheriff's Department, are entities or corporations separate and distinct from the Jefferson County, Alabama, and that the said Sheriff,

Sheriff's Deputies and Investigators, and other servants, officials, agents and/or employees, and the other named and unnamed officers, servants, officials, magistrates, agents and/or employees of Jefferson County, Alabama, may be sued independently and separately in its their own name and individual capacity, without notice of claim. Claimants do not by the filing of this notice of claim admit or concede that the said its Sheriff, Sheriff's Deputies and Investigators, and other servants, officials, agents and/or employees, and other named and unnamed officers, servants, officials, magistrates, agents and/or employees of Jefferson County, Alabama are one and the same with the county government entity, nor does claimant admit or concede that the notice of claim is a condition precedent for filing suit.

The claimant hereby demands that Jefferson County, Alabama, its Sheriff, Sheriff's Deputies and Investigators, and other servants, officials, agents and/or employees including its circuit clerk and magistrate, immediately furnish the claimants with the correct names and/or designations of any and all individuals who participated in or who have personal knowledge of the herein described acts and omissions complained of by claimants, and all video tapes, written and electronic statements, affidavits, and other evidence in its possession or in which it has access, tending to proof the herein described acts or omissions. All of the above information, and any and all police records, jail records including register, police mug shots, fingerprints, police radio logs, arrest reports, arrest tickets, blotters, books, video or audio tapes, arrest warrants, affidavits, complaints, and internal affairs complaints and interviews in anywise appertaining, naming, mentioning, connecting to the said claimant, Tywana S. Hambright, should immediately be forwarded to:

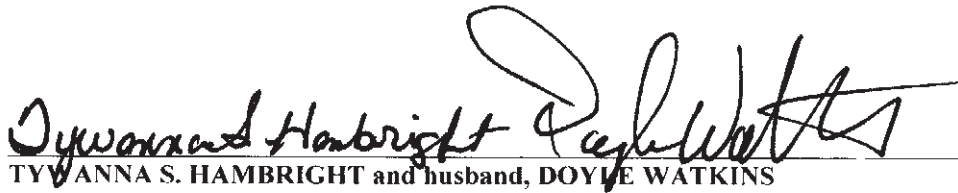
Anthony Piazza, Esquire  
P. O. Box 550217  
Birmingham, AL 35255-0217

As a result of the above said injuries and damages, claimant demands from the servants, officials, agents and/or employees of the County of Jefferson, the Jefferson County, Alabama, its Sheriff, Sheriff's Deputies and Investigators, and other servants, officials, agents and/or employees, the sum of \$300,000. as damages.

At all times mentioned herein, claimants have resided at 4943 Jim Goggans Road, Dora, AL 35062. At the time of the filing of this claim, claimants reside at 4943 Jim Goggans Road, Dora, AL 35062.

Claimant demands that if you know of any other person, firm or corporation you deem in anywise responsible for the aforesaid injury or damages, you should inform claimant of the name and address of each such person, firm or corporation immediately or provide the information to claimant's attorney as follows:



Anthony Piazza, Esquire  
P. O. Box 550217  
Birmingham, AL 35255-0217

  
TYWANNA S. HAMBRIGHT and husband, DOYLE WATKINS

STATE OF ALABAMA

COUNTY OF JEFFERSON

Before me, the undersigned authority, a Notary Public in and for said County, in said State, personally appeared the undersigned Claimant(s), who, being by me first duly sworn, and who, being known to me, depose and say that the facts set out in the foregoing Notice of Claim are true and correct to the best of his, her or their knowledge, information and belief.

  
TYWANNA S. HAMBRIGHT and husband, DOYLE WATKINS

Sworn to and subscribed before me this 20<sup>th</sup> day of Nov, 2010.

  
Notary Public

My Commission Expires:

May 3, 2012

Received, this \_\_\_\_\_ day of \_\_\_\_\_, 2010, by the Clerk of the County of Jefferson, Alabama.

By: \_\_\_\_\_